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Our File: 9-16085-1US (PSS/lmf)

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Number of pages including cover letter: 4

Date: October 27, 2006

From: Paul S. Sharpe

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E-mail: psharpe@ogilvyrenault.com

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<b>ART UNIT 3622</b> Examiner: Namrata Boveja	United States Patent Office Facsimile Centre	Alexandria, VA	571-273-8300

Re: Serial No. 09/892,615

Inventor(s): Brian HILLIER et al.

Title: ELECTRONIC PURCHASING SYSTEM AND METHOD

Power of Attorney, Revocation, Change of Correspondence Address attached.

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PTO/SB/21 (09-04)

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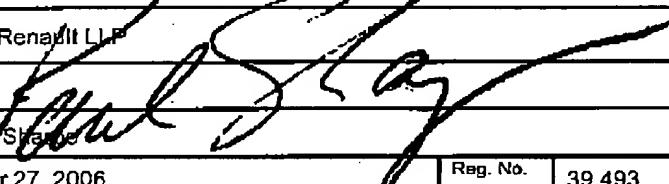
(to be used for all correspondence after initial filing)

		Application Number	09/892,615
		Filing Date	June 28, 2001
		First Named Inventor	Brian HILLIER
		Art Unit	3622
		Examiner Name	Namrata Boveja
Total Number of Pages In This Submission	3	Attorney Docket Number	9-16085-1US

## ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Reply to Missing Parts/ Incomplete Application	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Ogilvy Renault LLP		
Signature			
Printed name	Paul S. Shaefer		
Date	October 27, 2006	Reg. No.	39,493

## CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature	
Typed or printed name	Paul S. Shaefer
	Date
	October 27, 2006

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Sir:

**RE : United States Patent Application No. 09/892,615**

**Filed: June 28, 2001**

**Title: ELECTRONIC PURCHASING SYSTEM AND METHOD**

**Applicant(s): 3044105 Nova Scotia Limited**

**Inventor(s): Brian HILLIER et al.**

**Our Ref.: 9-16085-1US**

In connection with the above-captioned application, please find enclosed a Revocation of Power of Attorney document and a new Power of Attorney document. Would the Office kindly ensure that these are entered on the above-noted file.

Please send all correspondence to Ogilvy Renault LLP, 1981 McGill College Ave., Suite 1600, Montreal, Quebec, Canada H3A 2Y3.

The Commissioner is hereby authorized to charge any fees which may be required to our Account No. 19-5113.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Paul S. Sharpe".

Paul S. Sharpe  
Patent Agent  
Registration No. 39,493

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PTO/SB/82 (04-05)

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**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	09/892,615
Filing Date	June 28, 2001
First Named Inventor	Brian M. HILLIER
Art Unit	3622
Examiner Name	NAMRATA BOVEJA
Attorney Docket Number	9-16085-1US

**I hereby revoke all previous powers of attorney given in the above-identified application.** A Power of Attorney is submitted herewith.**OR** I hereby appoint the practitioners associated with the Customer Number:

20988

 Please change the correspondence address for the above-identified application to: The address associated with  
Customer Number:

20988

**OR** Firm or  
Individual Name Ogilvy Renault LLP

Address

City

State

Zip

Country

Telephone

Email

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)**SIGNATURE of Applicant or Assignee of Record**

Signature	<i>Brian Hillier</i>		
Name	Brian Hillier, 30441D5 Nova Scotia Limited		
Date	October 2 2006	Telephone	902-539-7343

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

 Total of \_\_\_\_\_ forms are submitted.

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